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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or Docket Number 10/067,463			ing Date 04/2002	To be Mailed
APPLICATION AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY 🛛				HER THAN
FOR			NUMBER FILED		.ED	NUMBER EXTRA			RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
BASIC FEE (37 CFR 1.16(a), (b), or (c))			N/A			N/A			N/A			N/A	
SEARCH FEE (37 CFR 1.16(k), (i), or (m))			N/A				N/A		N/A			N/A	
EXAMINATION FEE (37 CFR 1.16(o), (p), or (q))			N/A				N/A	-	N/A			N/A	
TOTAL CLAIMS (37 CFR 1.16(i))			minus 20 =			•			x \$ =		OR	x \$ =	
INDEPENDENT CLAIMS (37 CFR 1.18(h))			minus 3 =						X \$ =			x \$ _ =	
☐APPLICATION SIZE FEE (37 CFR 1.16(s))			If the specification and dra sheets of paper, the applic is \$250 (\$125 for small en additional 50 sheets or fra 35 U.S.C. 41(a)(1)(G) and			plication entity) fraction and 37	ation size fee due ity) for each tion thereof. See						
Щ	MULTIPLE DEPEN												
* IF	* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL			TOTAL	
APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)									SMAL	L ENTITY	OR		ER THAN ALL ENTITY
ENT	05/07/2007	CLAIMS REMAINING AFTER AMENDMENT			HIGHEST NUMBER PREVIOUS PAID FOR		PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
M	Total (37 CFR 1.16(i))	• 17	• 17		 26		= 0		X \$25 =	0	OR	x \$ =	
AMENDMENT	Independent (37 CFR 1.16(h))	• 3		Minus	•••5		= 0		X \$100 =	0	OR	x \$ =	
	Application Size Fee (37 CFR 1.16(s))												
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))										OR		
										0	OR	TOTAL ADD'L FEE	
		(Columi			(Colum		(Column 3)			-			
AMENDMENT	9/28/07	CLAIM REMAIN AFTE AMENDM	ING R		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,16(i))	. 1	6	Minus)	6	= 0		x \$ =	1	OR	x \$ =	
	Independent (37 CFR 1.16(h))	•	۷	Minus	***	7	= V		X \$ =		OR	x \$ =	
	Application Size Fee (37 CFR 1.16(s))										. 1		
AN	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									V	OR		
w 16	the entry in column		- 44			- 400 :			TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
** If	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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